

Debtor 1

ADAM

T.

WILLIAMSON

Case number (if known)

First Name

Middle Name

Last Name

Part 2: Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ 8,000.00	\$
For last calendar year: (January 1 to December 31, 2017) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ 18,335.00	\$
For the calendar year before that: (January 1 to December 31, 2016) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ 1,000.00	\$

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Sources of income Describe below.
	Gross income from each source (before deductions and exclusions)	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		
	\$	\$
	\$	\$
	\$	\$
For last calendar year: (January 1 to December 31,) YYYY		
	\$	\$
	\$	\$
	\$	\$
For the calendar year before that: (January 1 to December 31,) YYYY		
	\$	\$
	\$	\$
	\$	\$

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Part 3:**List Certain Payments You Made Before You Filed for Bankruptcy****1. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
_____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number _____ Street _____	_____			
City _____ State _____ ZIP Code _____				

		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's Name _____	_____			
Number _____ Street _____	_____			
City _____ State _____ ZIP Code _____				

		\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Creditor's Name _____	_____			
Number _____ Street _____	_____			
City _____ State _____ ZIP Code _____				

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7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No☐ Yes. List all payments to an insider.Dates of
paymentTotal amount
paidAmount you
still owe

Reason for this payment

Insider's Name

\$ _____ \$ _____

Number Street

City State ZIP Code

Insider's Name

\$ _____ \$ _____

Number Street

City State ZIP Code

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments that benefited an insider.Dates of
paymentTotal amount
paidAmount you
still owe

Reason for this payment

Include creditor's name

Insider's Name

\$ _____ \$ _____

Number Street

City State ZIP Code

Insider's Name

\$ _____ \$ _____

Number Street

City State ZIP Code

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
- ☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title <u>METROPOLITAN LIFE INS. CO.</u> <u>ADAM WILLIAMSON</u> Case number <u>02D01-1701-MF-000044</u>	FORECLOSURE	<u>ALLEN SUPERIOR COURT</u> Court Name Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title <u>DISCOVER BANK</u> <u>ADAM T. WILLIAMSON</u> Case number <u>02D01-1610-CC-002085</u>	SUMMONS	<u>ALLEN SUPERIOR COURT</u> Court Name Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
- ☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name Number Street City State ZIP Code	<div style="border: 1px solid black; height: 50px; width: 100%;"></div>		\$
	Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name Number Street City State ZIP Code	<div style="border: 1px solid black; height: 50px; width: 100%;"></div>		\$
	Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 ADAM T. WILLIAMSON Case number (if known) _____
 First Name Middle Name Last Name

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number _____ Street _____ City _____ State _____ ZIP Code _____			\$ _____

Last 4 digits of account number: XXXX-

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____		_____ _____	\$ _____ \$ _____
Person to Whom You Gave the Gift _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Person's relationship to you _____		_____ _____	\$ _____ \$ _____

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14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities
that total more than \$600

Describe what you contributed

Date you
contributed

Value

Charity's Name

\$

\$

Number Street

City

State

ZIP Code

Part 6:

List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and how
the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance
claims on line 33 of *Schedule A/B: Property*.

Date of your
loss

Value of property
lost

\$

Part 7:

List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

FRED WEHRWEIN

Person Who Was Paid

1910 ST. JOE CENTER RD., #52

Number Street

Description and value of any property transferred

CASH

Date payment or
transfer was
made

3/26/2018

Amount of
payment

\$ 800.00

\$

FORT WAYNE

City

IN

State

46825

ZIP Code

WEHRWEINPC@AOL.COM

Email or website address

Person Who Made the Payment, if Not You

Debtor 1

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Case number (if known)

First Name

Middle Name

Last Name

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You			\$
			\$

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code			\$
			\$

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Description and value of property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you			
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you			

Debtor 1 ADAM T. WILLIAMSON Case number (if known) _____
 First Name Middle Name Last Name

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date transfer was made
_____		_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
_____	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Number _____ Street _____				
City _____ State _____ ZIP Code _____				

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
_____	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Number _____ Street _____				
City _____ State _____ ZIP Code _____				

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
_____	Name _____		<input type="checkbox"/> No <input type="checkbox"/> Yes
Number _____ Street _____	Number _____ Street _____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Debtor 1 ADAM T. WILLIAMSON Case number (if known) _____
 First Name Middle Name Last Name

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Name of Storage Facility	Who else has or had access to it?	Describe the contents	Do you still have it?
Name _____ Number Street _____ City State ZIP Code _____	Name _____ Number Street _____ City State ZIP Code _____		<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name _____ Number Street _____ City State ZIP Code _____		\$ _____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

Name of Site	Governmental unit	Environmental law, if you know it	Date of notice
Number Street _____ City State ZIP Code _____	Governmental unit _____ Number Street _____ City State ZIP Code _____		_____

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25. Have you notified any governmental unit of any release of hazardous material?

☒ No☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of Site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No☐ Yes. Fill in the details.

Court or agency

Nature of the case

Status of the case

Case title

Court name

Number Street

City

State

ZIP Code

Case number

☐ Pending☐ On appeal☐ Concluded**Part 11:****Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)☐ A partner in a partnership☐ An officer, director, or managing executive of a corporation☒ An owner of at least 5% of the voting or equity securities of a corporation☐ No. None of the above applies. Go to Part 12.☒ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

ADAMS AUTO REPAIR

Business Name

AUTO REPAIR

EIN: 8 2 - 2 0 5 2 9 7 0

2201 TAYLOR STREET

Number Street

Name of accountant or bookkeeper

Dates business existed

FORT WAYNE IN 46802

City

State

ZIP Code

From OCT., 2015 To NOV., 2017

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

Business Name

EIN: -

Number Street

Name of accountant or bookkeeper

Dates business existed

City

State

ZIP Code

From To

Debtor 1 ADAM T. WILLIAMSON Case number (if known) _____
 First Name Middle Name Last Name

Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.
Business Name _____ Number Street _____ City State ZIP Code _____	_____ Name of accountant or bookkeeper _____	EIN: - Dates business existed From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date issued

Name

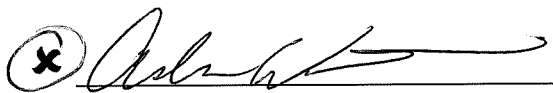
Number Street


City State ZIP Code

MM / DD / YYYY

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


 Signature of Debtor 1


 Signature of Debtor 2

X Date 3.29.18

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

United States Bankruptcy Court

NORTHERN District Of IN

In re ADAM T. WILLIAMSON

Case No. _____

Debtor

Chapter 7**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept..... \$ 800.00

Prior to the filing of this statement I have received \$ 800.00

Balance Due..... \$ 0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030)(12/15)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CHAPTER 7 CASES: REAFFIRMATION AGREEMENTS, STAYS OF PROCEEDINGS, LIEN AVOIDANCES AND SERVICES RENDERED AFTER THE INITIAL 341 MEETING OF CREDITORS.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

x 3-29-18
Date

x 
Signature of Debtor, Adam T. Williamson

 3-29-18
Signature of Attorney, Fred Wehrwein FRED WEHRWEIN, PC

Fill in this information to identify your case:

Debtor 1	ADAM	T.	WILLIAMSON
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN		District of IN
Case number (If known)			

☐ Check if this is an amended filing

Official Form 108

Statement of Intentions for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: BAYVIEW/METRO. LIFE INS. CO. Description of property securing debt: 12709 US HWY. 27 S., FORT WAYNE, IN	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: Description of property securing debt:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: Description of property securing debt:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: Description of property securing debt:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

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Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes

Lessor's name:

☐ No

Description of leased property:

☐ Yes**Part 3:** Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

(X) 

Signature of Debtor 1

X _____

Signature of Debtor 2

X Date 3-25-18
MM / DD / YYYY

Date _____
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT
NORTHER DISTRICT OF INDIANA
FORT WAYNE DIVISION

IN RE:

ADAM T. WILLIAMSON
XXX-XX-6508

CASE NO.

DEBTOR(S)

VERIFICATION OF CREDITOR MATRIX

The above named debtor (s) hereby verifies under penalty of perjury that
the attached list of creditors is true and correct to the best of the knowledge
and belief of the debtor (s).

Date: X 3-29-18

X Adam Williamson
Debtor

Joint Debtor

ALLEN CO. REG. WATER & SEWER
P.O. BOX 2269
FORT WAYNE, IN 46801

ALLEN CO. TREASURER
P.O. BOX 2540
FORT WAYNE, IN 46801

BARCLAY CARD
P.O. BOX 60517
CITY OF INDUSTRY, CA 91716

BAYVIEW/METRO. LIFE INSO. CO.
P.O. BOX 331409
MIAMI, FL 33233

BAYVIEW/METROPOLITAN LIFE INS. CO.
STEPHANIE REINHART
P.O. BOX 441039
INDIANAPOLIS, IN 46244

CAPITAL ONE
P.O. BOX 6492
CAROL STREAM, IL 60197

CAPITAL ONE
8605 BROADWAY
MERRILLVILLE, IN 46410

CHASE
P.O. BOX 15123
WILMINGTON, DE 19850

CITI CARD
P.O. BOX 78045
PHOENIX , AZ 85062

CREST FIN./KARL T. RYAN
6502 WESTFIELD BLVD.
INDIANAPOLIS, IN 46220

DIOR JEWELERS
3131 MANCHESTER EXP., STE. 53-A
COLUMBUS, GA 31909

DISCOVER BANK
P.O. BOX 6103
CAROL STREAM, IL 60197

DISCOVER BANK/LLOYD & MCDANIEL
P.O. BOX 23200
LOUISVILLE, KY 40223

ERIE INS.
100 ERIE INS. PLACE
ERIE, PA 16530

HOCH INS. AGENCY INC.
209 E. WASHINGTON CTR. RD.
FORT WAYNE, IN 46825

LUTHERAN HEALTH/BOA
15691 COLLECT. CTR. DR.
CHICAGO, IL 60693

LUTHERAN HEALTH/BOA
15673 COLLECT. CTR. DR.
CHICAGO, IL 60693

OREILLY AUTO PARTS
233 S. PATTERSON AVE.
SPRINGFIELD, MO 65802

PARKVIEW HEALTH
P.O. BOX 5600
FORT WAYNE, IN 46895

PAYPAL/SYNCHRONY
P.O. BOX 960080
ORLANDO, FL 32896

PNC BANK
P.O. BOX 856177
LOUISVILLE, KY 40285

PRAXAIR DISTRIBUTION INC.
DEPT. CH 10666
PALATINE, IL 60055

REPUBLIC SERV./COAST TO COAST FIN.
P.O. BOX 2096
THOUSAND OAKS, CA 91358

SPRINT
P.O. BOX 4191
CAROL STREAM, IL 60197

Debtor 1

First Name Middle Name Last Name

Case number (if known)

8. Unemployment compensationDo not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \downarrow

For you \$ _____

For your spouse..... \$ _____

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

+ \$ _____

+ \$ _____

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ _____

+ \$ _____

= \$ **2606**Total current
monthly income**Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11. Copy line 11 here \rightarrow \$ **2606**

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b. **31,279****13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

IN

Fill in the number of people in your household.

ONE

Fill in the median family income for your state and size of household. 13.

47,799

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x **Adam Wilson**

Signature of Debtor 1

x

Signature of Debtor 2

x Date **3.29.18**
MM / DD / YYYYDate _____
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.